



## High-Risk Participant Referrals

RD  
LC  
HCP  
DNT  
SS/MHP  
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Registered Dietitian  
Lactation Counselor/Lactation Consultant  
Health Care Provider  
Dental Services  
Social Services/Mental Health Care Provider  
Only refer to LC if participant is breastfeeding  
Only refer if participant is not actively receiving prenatal care  
WIC RD to coordinate with outside RD, HCP or other specialist involved in the care of the participant

Code	DESCRIPTION	RD	LC*	HCP	DNT	SS/MHP
101	<b>UNDERWEIGHT WOMEN</b> if pregnant or if postpartum after second consecutive measure.	X				
103	<b>UNDERWEIGHT OR AT RISK FOR UNDERWEIGHT</b> if infant refer on first measure; if child on second consecutive measure	X	X	X		
113	<b>OBESE</b> on second consecutive measure	X		X		
114	<b>OVERWEIGHT OR AT RISK OF BECOMING OVERWEIGHT</b> if overweight on second consecutive measure	X				
121	<b>SHORT STATURE OR AT RISK OF SHORT STATURE</b> after second consecutive measure			X		
133	<b>HIGH MATERNAL WEIGHT GAIN</b> if pregnant	X		X		
134	<b>FAILURE-TO-THRIVE***</b>	X	X			
135	<b>SLOWED/FALTERING GROWTH PATTERN</b> for two consecutive measures.	X	X	X		
141	<b>LOW BIRTHWEIGHT AND VERY LOW BIRTHWEIGHT</b> if infant with feeding difficulties or problems with weight gain	X	X	X		
142	<b>PREMATURITY</b> if breastfeeding infant		X			
201	<b>LOW HEMATOCRIT/LOW HEMOGLOBIN</b> if not at or above the established cut-off value upon recheck	X		X		
301	<b>HYPERMESIS GRAVIDARUM</b>	X				

Code	DESCRIPTION	RD	LC*	HCP	DNT	SS/MHP
302	<b>GESTATIONAL DIABETES***</b>	X				
303	<b>HISTORY OF GESTATIONAL DIABETES**</b>	X		X		
304	<b>HISTORY OF PREECLAMPSIA**</b> if pregnant	X		X		
311	<b>HISTORY OF PRETERM DELIVERY**</b> if pregnant	X		X		
312	<b>HISTORY OF LOW BIRTH WEIGHT**</b> if pregnant	X		X		
331	<b>PREGNANT AT A YOUNG AGE</b>	X				
335	<b>MULTIFETAL GESTATION</b> if pregnant or breastfeeding	X	X			
338	<b>PREGNANT WOMAN CURRENTLY BREASTFEEDING</b> if concerns about nutritional needs are present	X	X			
341	<b>NUTRIENT DEFICIENCY DISEASE***</b>	X				
342	<b>GASTROINTESTINAL DISORDERS***</b>	X				
343	<b>DIABETES MELLITUS***</b>	X				
344	<b>THYROID DISORDERS***</b>	X				
345	<b>HYPERTENSION AND PRE-HYPERTENSION***</b>	X				
346	<b>RENAL DISEASE***</b>	X				
347	<b>CANCER***</b>	X				
348	<b>CENTRAL NERVOUS SYSTEM DISORDERS***</b>	X				
349	<b>GENETIC AND CONGENITAL DISORDERS***</b>	X				
351	<b>INBORN ERRORS OF METABOLISM***</b>	X				
352a	<b>ACUTE INFECTIOUS DISEASES***</b>	X				
352b	<b>CHRONIC INFECTIOUS DISEASES***</b>	X				
353	<b>FOOD ALLERGIES***</b>	X				
354	<b>CELIAC DISEASE***</b>	X				
356	<b>HYPOGLYCEMIA***</b>	X				
358	<b>EATING DISORDERS***</b>	X		X	X	X
360	<b>OTHER MEDICAL CONDITIONS***</b>	X				

Code	DESCRIPTION	RD	LC*	HCP	DNT	SS/MHP
362	<b>DEVELOPMENTAL, SENSORY OR MOTOR DISABILITIES INTERFERING WITH THE ABILITY TO EAT***</b>	X	X	X		
381	<b>ORAL HEALTH CONDITIONS (EXCEPT EARLY CHILDHOOD CARIES)</b> if one or more food groups are being eliminated	X			X	
382	<b>FETAL ALCOHOL SYNDROME</b> if feeding difficulties or problems with weight gain	X		X		
383	<b>NEONATAL ABSTINENCE SYNDROME</b>	X				X
411	<b>INAPPROPRIATE NUTRITION PRACTICES FOR INFANTS</b> if routine diet is very low in calories and/or essential nutrients	X		X		
425	<b>INAPPROPRIATE NUTRITION PRACTICES FOR CHILDREN</b> if routine diet is very low in calories and/or essential nutrients, pica	X		X		
427	<b>INAPPROPRIATE NUTRITION PRACTICES FOR WOMEN</b> if consuming a diet very low in calories and/or essential nutrients, pica	X		X		
602	<b>BREASTFEEDING COMPLICATIONS OR POTENTIAL COMPLICATIONS FOR WOMEN</b>		X			
603	<b>BREASTFEEDING COMPLICATIONS OR POTENTIAL COMPLICATIONS FOR INFANT</b> if infant shows signs of breastfeeding jaundice, weak or ineffective suck, inadequate weight gain		X	X		
801	<b>HOMELESSNESS</b>					X
901	<b>RECIPIENT OF ABUSE</b>					X
902	<b>WOMAN OR PRIMARY CAREGIVER WITH LIMITED ABILITY TO MAKE FEEDING DECISIONS AND/OR PREPARE FOOD</b>					X